

MINUTES

**MONTANA SENATE
56th LEGISLATURE - REGULAR SESSION
COMMITTEE ON BUSINESS AND INDUSTRY**

Call to Order: By **CHAIRMAN JOHN HERTEL**, on January 29, 1999 at 9:00 A.M., in Room 312-2 Capitol.

ROLL CALL

Members Present:

Sen. John Hertel, Chairman (R)
Sen. Mike Sprague, Vice Chairman (R)
Sen. Dale Berry (R)
Sen. Vicki Cocchiarella (D)
Sen. Bea McCarthy (D)
Sen. Glenn Roush (D)
Sen. Fred Thomas (R)

Members Excused: None.

Members Absent: None.

Staff Present: Bart Campbell, Legislative Branch
Mary Gay Wells, Committee Secretary

Please Note: These are summary minutes. Testimony and discussion are paraphrased and condensed.

Committee Business Summary:

Hearing(s) & Date(s) Posted: SB 108, 1/27/1999
Executive Action: SB 210; SB 130; SB 132

**{Tape : 1; Side : A; Approx. Time Counter : 0;
Comments : 9:07 a.m.}**

HEARING ON SB 108-FIRST PART

CHAIRMAN JOHN HERTEL opened the hearing and gave some instructions on how this particular bill would be heard. There are three sections of the bill and so will be heard in that manner. The first section to be heard is on: hearing aid dispensers; veterinary licenses; board of sanitarians; accountant exams; appraiser standards. The second section is on: physician licenses; psychologists; midwives; denturists. The third section is on: dentists. **EXHIBIT (bus23a01)**

Sponsor: SENATOR DALE BERRY, SD 30, HAMILTON

Proponents for Hearing Aids Dispenser, Veterinary Licenses, Board of Sanitarians, Accountant Exams, Appraiser Standards:

Perry Eskridge, Div. of Professional & Occupational
Licensing, Dept. of Commerce

Mona Jamison, MT Chapter, American Physical Therapy
Assoc.

Rodham Cunningham, Fishing Outfitters Assoc. of MT.

Stuart Doggett, MT Veterinary Medical Assoc.

Opponents: None

Opening Statement by Sponsor:

SENATOR DALE BERRY, SD 30, HAMILTON. SB 108 was requested by the Department of Commerce. I served on the Realty Board and I had made appointments with **Perry Eskridge** who is the attorney for that Board. **Mr. Eskridge** asked me to carry this little cleanup bill for the Dept. and you see the long list of people here so it must not be too simple. There will be many amendments proposed, but I still feel this is a relatively simple bill. There are 10-12 boards that are dealt with in this bill. There is a set of amendments **EXHIBIT (bus23a02)** that have been sponsored by the Department. There is a Fiscal Note attached. The Note addresses adding one person to the Board of Psychologists.

Proponents' Testimony:

Perry Eskridge, Staff Legal Counsel, Professional & Occupational Licensing Div., Department of Commerce. I will not belabor all the points that are listed in the bill. The hearing aid dispensing portion relates to the fee. The fee had been set at 15% and the Board has had problems in enforcing that because some dispensers are claiming that some of the costs included in dispensing hearing aids exceed 15%. The Board realizes they do

not have the authority to increase or decrease that fee. They would like to remove that from the statute and have that fee set by rule making.

My understanding of the veterinary licensing is that it just changes the format for licensing somewhat.

The Board of Sanitarians wishes to have the statutory required number of meetings be removed from the statute. They want that changed so that they meet once a year. They have found that it is not necessary to meet so many times throughout the year. This would save them some money.

The accountant exams is primarily the format of the exam.

The appraisal standards board wishes to put into statute an interpretation that will specify all licensed certified appraisers regardless of whether the appraisal is a federally related transaction or is capable of being performed by an unlicensed person under 37-54-201(3) must continue to follow the uniform standards of professional appraisal practice.

{Tape : 1; Side : A; Approx. Time Counter : 10.5}

Mona Jamison, MT Chapter, American Physical Therapy Assoc. I am here to speak in strong support of Sections 3, 4, 5 and 6. These sections actually beef up the Dept.'s authority to file civil actions against persons who are practicing any of those professions without a license. The physical therapists throughout the State have come across ads in newspapers, radio ads, etc. that say certain people are doing physical therapy. They may be doing other things very legitimately, but under the Physical Therapy Practice Act, to use the words "physical therapy", etc. is against the law unless you have the license.

Rodham Cunningham, Fishing Outfitters Assoc. of MT. I concur with **Ms. Jamison's** statements. Outfitters have long been hurt by unlicensed or rogue outfitters in the field. This bill will tighten the ability to prosecute unlicensed practice, particularly at the county attorney level where these cases end up. For one reason or another, there is reluctance or disinterest or unclear ability of the county attorney to successfully prosecute these cases.

Stuart Doggett, MT Veterinary Medical Assoc. We would like to go on record in support of this bill and Sections 12 and 13 are acceptable to us.

Opponents' Testimony: None

Questions from Committee Members and Responses: None

{Tape : 1; Side : A; Approx. Time Counter : 15.4}

HEARING ON SB 108-SECOND PART

Sponsor: SENATOR DALE BERRY, SD 30, HAMILTON

Proponents of Physician Licenses, Psychologists, Midwives, and Denturists:

Perry Eskridge, Div. of Professional & Occupational
Licenses, Dept. of Commerce
Lee Wiser, Denturist, Bozeman
Dr. Thad Langford, Board of Dentistry, Bozeman
Steve Yeakel, MT Council for Maternal & Child Health
Steve Browning, MT Hospital Assoc.

Opponents: None

Opening Statement by Sponsor:

SENATOR DALE BERRY, SD 30, HAMILTON. I will have Mr. Eskridge present the second section which is physician licenses, psychologists, midwives and denturists.

Proponents' Testimony:

Perry Eskridge, Chief Legal Counsel. To be granted a physician's license we would like to add: "has completed an approved postgraduate program of at least 2 years. . . . (and) has had experience or training that is at least the equivalent of a 2-year postgraduate program". There is an amendment that is being offered. I would like to submit a letter of support from Deborah Modesette, Federation of State Medical Boards of the United States, Inc. **EXHIBIT (bus23a03)** .

The psychologists would like to add one more member to their board.

The midwives would require the supervision of a physician.

There is some clean up language concerning the denturists.

Lee Wiser, Denturist, Billings. I rise today in support of **SB 108** with one small reservation. It is the guarantee on page 15, line 9. It is difficult to guarantee health services as has been found out in court. It has been used as a weapon against denturists from time to time. There are cases where patients come back with a denture that fits fine, but will say "I'm short of money" and another time a gentleman said his denture did not fit, I asked him to bring it back in, he said he couldn't cause it was lost, but about six months later he did return with his dentures. But I had almost given him his money back. I would like to submit an amendment **EXHIBIT (bus23a04)**.

Dr. Thad Langford, Bozeman. I speak in support of **SB 108** as it pertains to denturity. We view it as a housekeeping matter and most of what is in the bill is an attempt to make the statute standard for all professionals.

Steve Yeakel, MT Council for Maternal & Child Health. He gave his testimony and handed that in as well as an informational sheet **EXHIBIT (bus23a05)**.

Opponents' Testimony: None

Questions from Committee Members and Responses:

SENATOR VICKI COCCHIARELLA asked **Mr. Yeakel** if he had had an opportunity to share his concerns with midwives. **Mr. Yeakel** said that points of view were very different over the debate of the rules. The concern is important to them, but it is not as big as their desire to support the other section of the bill. **SEN. COCCHIARELLA** then asked if the midwives are opposed to a four year college degree. **Mr. Yeakel** replied that the Board of Alternative Health Care recommended this but the Dept. of Commerce did not approve its inclusion in this bill.

Additional Testimony:

Steve Browning, MT Hospital Assoc. We have amendments to the portion of the bill dealing with the residency requirements and cleared it with the Board of Medical Examiners and with the sponsor. **EXHIBIT (bus23a06)**.

{Tape : 1; Side : A; Approx. Time Counter : 29}

HEARING ON SB 108-THIRD PART

Sponsor: SENATOR DALE BERRY, SD 30, HAMILTON

Proponents for Dentists:

Perry Eskridge, Div. of Professional & Occupational
Licenses, Dept. of Commerce

Alan Strange, Executive Director, MT Primary Care
Assoc.

Roy Lowry, Board Member, Community Health Center,
Helena

Robert W. Bowman, MT Dental Assoc., Kalispell

Joel Maes, Dentist, Helena

John Snively, Dentist (?)

Ken Small, Dentist, Great Falls

Bill Kennedy, Yellowstone Chamber of Commerce

Mary McCue, MT Dental Assoc.

Steve Pilcher, MT Dental Hygienists' Assoc.

Tom Ebzery, St. Vincent Hospital Health Center

Norma Jean Boles, Department of Corrections

Dan Petersen, patient

Terrie Casey, patient

Elizabeth DeGarmo, patient

John Fenner or Ferrell (?)

Georgia Honey, Missoula

Raynita Meier, Butte

Richard Borger, patient

Lisa Smith, patient

Mary Lou Abbott, MT Public Health Assoc.

Jim Mitchell, Director, Student Health Service, MSU

Al Bert, Dental Health Clinic, Student Health
Service, MSU

Raynita Meier, Butte Community Health Center

Jo Ann Walsh Dotson, Bureau Chief, Family &
Community Health Bureau, Dept. of Public
Health & Human Services.

Lil Anderson, Executive Director, Yellowstone City/
County Health Dept.

Could not understand her name.

Pam Schlegel, Social Worker, Partnership Health
Center, Missoula

Laurie Francis, Executive Director, Community Health
Partners, Livingston

Someone who showed her waiting list of patients

Ted Madden, Community Health Partners, Livingston

Dr. Thad Langford, President, Board of Dentistry,
Bozeman

Opponents: Dr. Scott Erler, Dentist, Missoula
Dr. Scott Schroeder, Missoula
Dr. Terry Klampe, Missoula
John Gillam, Missoula

Opening Statement by Sponsor:

SEN. BERRY handed the hearing back to **Mr. Eskridge**.

Proponents' Testimony:

Perry Eskridge, Chief Legal Counsel. This will deal with Section 8, Section 9 and Section 10. Our primary focus of this section will be on Section 8, the new proposed Subsection 6, 7 and 8. Subsection 6 deals with dentist licensees who contract with University professional facilities and community health care centers that provide for treatment, providing that the treatment is within the discretion of the licensed dentist and the section is not construed as a private authority. There are also some statute amendments.

Alan Strange, Executive Director, MT Primary Care Association. He gave his testimony and handed in a written copy **EXHIBIT (bus23a07)**. He also handed in a fax from Mary Andersen, Deputy Director, Bureau of Primary Health Care, Dept. of Health & Human Services **EXHIBIT (bus23a08)**.

{Tape : 1; Side : A; Approx. Time Counter : 41.1}

Roy Lowry, Board Member, Community Health Center. I believe this bill should be passed. For those people who don't qualify for Medicaid, this is an excellent provision for those who need it. The dental clinic provided me with great service. They try to help people who fall through the cracks. There are many out there in the same situation as I am. The dentists are working on a voluntary basis. It works very well.

Dr. Robert Bauman, President, MT Dental Assoc., Kalispell. The MT Dental Assoc. supports **SB 108** with the inclusion of the amendments that **SEN. BERRY** has requested. The MDA has worked for the last few years to clarify how these community health centers can operate within the law. We have reached a compromise of sorts. CHC's deliver dental care with volunteer dentists. The universities have agreed to restrict their services to students only. The MDA has agreed not to seek to restrict the CHC's services since this is through the advocacy of patients. MDA represents about 90% of all practicing dentists in Montana. Our

membership is largely in support of this bill. Of course, in all things there are some differences of opinions. Lastly, I would like to say that if there is any doubt about dentists responding to the needy for dental care, just examine the facts. There are dentists who volunteer in many ways to help many people. And they also subsidize many patients through their use of Medicare and Medicaid. Their reimbursement is 57 cents on the dollar. For children it is about 72 cents on the dollar. There are many other programs that dentists work with. The MDA encourages dentists who are willing to volunteer their time and talents.

**{Tape : 1; Side : B; Approx. Time Counter : 0;
Comments: 9:50 a.m.}**

Dr. Joel Maes, Helena. **SB 108** is a necessary piece of legislation. It has been developed in response to a lawsuit that challenges the legality of those practicing in public clinics and university campuses because the clinics are not technically owned by dentists. Under current statute that may or may not be a illegal activity. However, the basis of the lawsuit that arises is fundamentally incorrect. The MT Dental Practice Act had been thought to have been developed to protect the professional dentists. In reality the MT Dental Practice Act was developed to protect the public and as such it shouldn't break the concept of dental care for the low income portion of the population of Montana. In view of the passage of time and needs, it is necessary to address the issues as they are being presented here today. Those who are willing to volunteer their time and talents should not be prohibited by out-dated laws. In the Helena community, our Cooperative Dental Clinic is a part of the Helena Cooperative Health Center and it is a unique example of what can be achieved by the combined efforts of local, state and federal governmental contributions. Since 1994, we have treated over 2,623 patients and provided for \$214,000 worth of services. **SB 108** will resolve this issue in a way that will allow continued treatment of the indigent and working poor. Our clinic does use a sliding scale on the ability to pay. The care is top quality.

Dr. John Snively, Dentist, Missoula. I speak in favor of this bill with the amendments proposed by **SEN. BERRY**. Dr. Maes has covered most of the territory I was planning to cover. But remember, it is important to get the small things taken care of early. This in the long run will save money. Our health center in Missoula and others will ensure that volunteering dentists will be able to provide this care that will improve the health of the patients in the clinic and ultimately save the community money.

Dr. Ken Small, Great Falls. I have practiced for 30 years. I am a member of the City/County Health Committee and a member of the Council which will provide dental services and direction to our new facility. We have a \$2.4 million health facility which opened in December 1998. We were able to incorporate a dental unit within the confines of this building. I do not fear competition as a dental practitioner; I thrive on it. It makes us all better. (He complimented the legislators for the giving of their time.) We have a great opportunity to serve people who are not served in any other capacity. I hope you will consider this as you study this bill. Please don't deny us this opportunity.

{Tape : 1; Side : B; Approx. Time Counter : 10.6}

Bill Kennedy, Yellowstone County Commissioner. I am also a member of the City/County Board of Health. With our facility we were able to provide dental care. We have several volunteer dentists who give of their time. The figures that I do have of indigent dental care over the last two years has doubled to 1200 cases. We have 75 people on the waiting list. This is a very important bill for us and for our community. I ask for your support today.

Mary McCue, MT Dental Assoc. Montana, like most states, has a restriction in the Dental Practice Act that provides that only a dentist may own or operate or manage a dental practice. This bill amends that restriction to allow three very narrow kinds of clinics to employ or contract their dentists. As Dr. Bauman, our president, has explained, members of the Dental Assoc. have worked very hard over the past two years to clarify how these kinds of clinics should begin to offer dental services, especially in regard to a Federally Qualified Health Clinic. Some of our dentists have been concerned that by creating this kind of exemption, that we would create a system in which public funded clinics are directly competing with private dentists for delivery of care to persons who otherwise are able to pay. That is because the FQHC's by their very designation are in medically under-served areas. That means that they are required to deliver services to any person in their service area even to someone who has their own insurance or may be able to pay otherwise. Other states have struggled with this issue regarding public clinics and have directed it somewhat differently. Texas enacted a law that said the Board of Dentistry will determine which public clinic will serve in their community. Kansas has restricted dentists working in these clinics to serve indigent persons. But as we have discussed this issue for the last two years with representatives of the clinics, they have told us that there is no basis in the federal statutes which require the clinics to

limit their service to indigent persons. Nor is there any restriction that requires them to prioritize care. They have told us that if we enact that kind of limitation we are endangering their funding. The MT Dental Assoc. does not want to prevent in any way our dentists from being able to volunteer. We do not bring any amendment to this bill that would require the clinics to prioritize to indigent persons. We support the sponsor's amendments only. Thank you.

Steve Pilcher, MT Dental Hygienists' Assoc. He gave his testimony and handed in a written copy **EXHIBIT (bus23a09)**.

Tom Ebzery, Attorney, Billings, St. Vincent Hospital & Health Center. We stand in strong support for **SB 108**. Dentist providers and others have carefully worked on this language. We endorse this bill.

Norma Jean Boles, Health Service Manager, Dept. of Corrections. She gave her testimony and handed in a written copy **EXHIBIT (bus23a10)**.

*{Tape : 1; Side : B; Approx. Time Counter : 18.1;
Comments : 10:10 a.m.}*

Dan Petersen, patient. He gave his testimony and handed in his written testimony **EXHIBIT (bus23a11)**.

Terrie Casey, Board of Health, Lewis & Clark County. She gave her testimony and handed in her written testimony **EXHIBIT (bus23a12)**.

Elizabeth DeGarmo, patient. Partnership Health has provided services for me and my family. Mt son had an accident and we couldn't get help anywhere. Partnership Health took good care of my son and I am thankful for this kind of service.

Terry Ferrell, Missoula. I ask for your support. I had two broken teeth and for six months could not get anyone to look at me. My wife has tried to get treatment for two years and has been turned away. I urge your support of this bill.

Georgia Honey. She gave her testimony and handed in her written testimony **EXHIBIT (bus23a13)**.

{Tape : 1; Side : B; Approx. Time Counter : 26.2}

Anita Poyer, patient. I would like to see the passage of this bill.

Richard Borgen, patient. I would like you to pass this bill.

Lisa Smith, single parent. She handed in her testimony
EXHIBIT (bus23a14) .

Mary Lou Abbott, MT Public Health Assoc. We certainly support this bill.

Jim Mitchell, Director, Student Health Service, MSU. He handed in his testimony in support of the bill **EXHIBIT (bus23a15) .**

Al Bert, Dental Health Clinic, Student Health Service, MSU. I would like to say this is the first time that Health Clinic and MSU has agreed on something. We support this bill.

Raynita Meier, Butte Community Health Center. We encourage the support of this bill.

Jo Ann Walsh Dotson, Bureau Chief, Family & Community Health Bureau, Dept. of Public Health & Human Services. She handed in her testimony in support of the bill **EXHIBIT (bus23a16) .**

Lil Anderson, Executive Director, Yellowstone City County Health Dept. She handed in her testimony in support of the bill
EXHIBIT (bus23a17) .

Could not understand the lady's name who spoke at this spot.

Pam Schlegel, Social Worker, Partnership Health Center, Missoula. She handed in her testimony **EXHIBIT (bus23a18) .**

Laurie Francis, Executive Director, Community Health Partners. I ask your support for this bill **EXHIBIT (bus23a19) .**

Someone who showed her waiting list of patients.

Ted Madden, Community Health Partners, Livingston. Handed in testimony in support **EXHIBIT (bus23a20) .**

Dr. Thad Langford, President, Board of Dentistry, Bozeman. He said that he was available for any questions.

*{Tape : 1; Side : B; Approx. Time Counter : 29.8;
Comments : 10:20 a.m.}*

Opponents' Testimony:

Dr. Scott Erler, Dentist, Missoula. I have practiced dentistry for 23 years. I have served on the MT Board of Dentistry for 6 years and have served as chairman of the board. I would like to address this issue. I have some proposed amendments

EXHIBIT (bus23a21) .

Missoula County has not been living by the rules that we all have to abide by. The law in question is "Only a dentist can own and operate a dental clinic." It has been a law for a long time. It is a good law and one that can be enforced and has been enforced up to the Supreme Court. A year ago I called the Missoula County Commissioners and told them they needed to change the way they were doing business in order to comply with Montana law. In two days, I received a call from a former legislator, Diane Sands, and she informed me that they did not need to comply with Montana law because they had received a federal grant and therefore they were pre-empted in Montana. Ms. Sands then went to the Board of Dentistry. They also ignored the problem. In May I filed a formal complaint with the Board of Dentistry. They dismissed my complaint without even looking at it. They then proceeded to see how they could change the law. As a regulator, their job was to enforce the law, not to change it. I believe that everyone must abide by the law. This includes the University system. In my opinion, the University is a school. It has no business of competing with private industry especially with something as discretionary as dental care. For 17 years they have been practicing at the University. They remove 9,000 potential patients from Missoula practices each year. Other than emergency procedures, all dental procedures are discretionary. The University currently hires two full-time hygienists. Over the last 17 years, that could be calculated out to have removed over \$2.5 million from the private dentist practices in Missoula county. How does this affect us as small businesses? First thing one does is increase the fees. The second thing that happens is that there is over-prescribed treatments. Next, one downsizes. There are 60 practices in Missoula. We hire at least four employees, all of which are women. We pay good salaries. That is 240 people relying on that income to support themselves. We pay the taxes that pay for the huge federal grants that keep coming into the state. Practitioners start to push the envelope. They do procedures that they are not qualified to perform.

Dentistry is a good, clean and stable business. We are not opposed to competition. We have lots of competition, but we are opposed to government competition. We cannot compete with the government who pays for buildings--a \$1.6 million building. The county gave away a \$600,000 piece of land and they employee full-time government employees. I question how my taxes are being spent.

If the University would even limit itself to the students, that would be one thing. They treat spouses of students. These two groups are targeting my patients. We already have had volunteering dentists in Missoula. It may not have been a perfect program but it was in place. But they were there for those true emergencies that came up. We just want everyone to comply with the law. We have a good structure and I think everything could be resolved if they weren't so stubborn down there and live by the rules, but they won't do it.

{Tape : 1; Side : B; Approx. Time Counter : 41.6}

Dr. Scott Schroeder, Dentist, Missoula. I would like to offer a little bit different perspective. I have been practicing dentistry here for two years, ten years in Nebraska. Two years ago my wife and I set up our own practice with state-of-the art equipment with our own funds. One of the issues that concerns me in trying to establish a new practice in Missoula is how can I compete with a federally subsidized facility. The indigent people need care, but the sliding fee scale is another thing. I look at this as unfair competition. There are many people who can afford dental care but they will go there for the sliding fee scale. I can't compete with that--with a subsidized dental practice. I am not motivated by greed. Last year there was a program called "Dentists With A Heart". Only four dentists participated in that program. My wife and I were two of those four. We provided an entire day of care which amounted to \$4800 worth of dental care. I don't have a problem with the University dental health care. My concern is the sliding fee scale.

{Tape : 2; Side : A; Approx. Time Counter : 0}

Dr. Terry Klampe, Dentist, Missoula. This is not a simple bill. There are some important distinctions. We are not trying to shut down partnership funding. We endorse volunteerism in free dentistry. I have done my share of giving help either partially free or free. The distinction we have to make here is what are we talking about--government dentistry. It has been said that these are not government clinics. I say that if they hire dentists, pay dentists and the government picks up 72% of the tab and the state picks up 28% of the tab, then what are they if they are not government clinics. A voluntary program has become a government dentistry. We are here to talk about that distinction. We see developing here in Montana is government dentistry. There are nine of these clinics in Montana. If the clinic in Missoula is doing charitable, free dentistry, we love it. But we don't approve of government dentistry with sliding fee scales. For the dentists who stood up and talked about the need for this kind of care, I have one thought I would convey to you. In effect, what

we are going to get with these clinics is "patient dumping". This is a popular political buzz word. I have had several of these dentists stand up and tell me personally that they are looking forward to partnership clinic being up and running because that is where all their poor people are going to be sent because they do not want these people in their waiting rooms. This is "patient dumping". This is going to be a two-tiered system under socialized medicine. The quality of work these people are going to receive is going to be questionable. To summarize, I would like to point out that these clinics are not free clinics. These clinics are also not indigent clinics. They must take any and everyone who comes to them. This is an example of stealth welfare. We do not support arrogant, behind your back bureaucratic acts like this partnership clinic.

**{Tape : 2; Side : A; Approx. Time Counter : 6.1;
Comments : 10:40 a.m.}**

John Gillam, Attorney, for Dr. Erler and Dr. Klampe. A lawsuit has been filed in district court in Missoula County. That suit is now before Judge Hensen. I hope that you would not put the cart before the horse. I would ask the committee to not act on this bill until the Judge has made his ruling. Partnership Health Center will be judged to have been operating legally or illegally. If the Judge rules in their favor, there is no reason to change the law. If Partnerships is correct in the legal arguments in this court case and prevails, it means that the law does not need to be changed. On the other hand, if Dr. Erler and Dr. Klampe prevail it means that Partnership can operate within the confines of the law. The reason for that is, Partnership says they can't operate within the Montana law. But in order for us to win, we have to show that they can operate under both statutory laws--Federal and State. We have to show that they can change the way they manage Partnership Health Center and be within the confines of the law. Either way, the law does not need to be changed.

Dr. Klampe came forward and said that a proponent said a picture was worth a thousand words and he then showed a picture of the new Partnership Health Center **EXHIBIT (bus23a22)** that is worth about \$2 million.

Additional Submitted Testimony:

A. Farrel Rose, Chairman, Board of Real Estate Appraisers

EXHIBIT (bus23a23)

Dr. Dan O'Neil, Butte EXHIBIT (bus23a24)

Dr. Patrick J. McGree, M.D., Butte EXHIBIT (bus23a25)

Jeff Struble, Executive Director, Butte Silver Bow Primary Health

Care Clinic, Inc. **EXHIBIT**(bus23a26)
David Kiesling, Dental Profession, Helena **EXHIBIT**(bus23a27)
Michelle Hines, Patient, Helena **EXHIBIT**(bus23a28)
Patrick W. Smith, President, MT Public Health Assoc.
EXHIBIT(bus23a29)
Steve Yeakel, Chairman, MT Children's Alliance **EXHIBIT**(bus23a30)
Lynn Vradenburg, Patient, Helena **EXHIBIT**(bus23a31)
Melinda Fulton, Dental Clinic Coordinator, Helena
EXHIBIT(bus23a32)
Montana Nurses' Assoc., Helena **EXHIBIT**(bus23a33)

{Tape : 2; Side : A; Approx. Time Counter : 12.1}

Questions from Committee Members and Responses:

SENATOR BEA MCCARTHY asked **Melody Brown, Legal Counsel, Board of Dentistry** to look at the title of the amendments that was offered by **SEN. BERRY**. Could you clarify number one with the words "charitable or free clinics" and substitute federally funded clinics. **Ms. Brown** said this language was changed to include different kinds of clinics and that they are all federally funded. They are referred to in the bill in Section 8, page 6, line 19. There is a reference to Federally Qualified Health Centers and to the federal law that they reference, so the definition of FQHC would be in the title of the law.

SEN. MCCARTHY said that currently here in Helena, it is her understanding that there is a charitable, free clinic. **Ms. Brown** said yes and it was suggested by the MT Dental Assoc. that the bill be made more clear exactly what the clinics were.

SEN. FRED THOMAS asked **Dr. Thad Langford** then **Melody Brown** if the clinics that have been discussed are licenced now in the State. **Dr. Langford** said that as the law stands today, they are not. Only a dentist can own and operate a clinic. That is why we are here.

SEN. THOMAS asked how long has this been going on. Someone in the audience said 1981. **SEN. THOMAS** asked if these clinics have been subject to state law in the past, though not licenced. **Dr. Langford** said yes they had been.

SEN. THOMAS asked **Pam Schlagel, Partnership Health Clinic**, if the picture that was shown by Dr. Klampe is a picture of the Health Clinic. **Ms. Schlagel** said that it is the Partnership Health Clinic which is a FQHC. We help patients access dental, mental and medical health services. **SEN. THOMAS** asked if the Clinic accepts

any patient for dental health. **Ms. Schlagel** said that under Federal law, they were required to accept any patient who comes in. Only 2.8% of our patient population is served for dental purposes. Right now, the clinic currently has funding from the county commissioners that allow them to contract with one dentist. That contract is for \$7000 for the year. There are 15 dentists who volunteer. The majority of those dentists take one patient per month although there is access to a dentist for emergency situations. **SEN. THOMAS** stated that the patients that are seen, does the clinic bill them like Medicaid. **Ms. Schlegel** said that the Clinic will only see patients who are registered as a medical patient. The Clinic is not open to the general public at this time and yes, the patients are billed on a sliding fee scale. **SEN. THOMAS** asked if the Clinic bills Medicaid. **Ms. Schlegel** said that Medicaid patients only see the contracted dentist and therefore the Clinic does not bill Medicaid.

*{Tape : 2; Side : A; Approx. Time Counter : 24.1;
Comments : 10:57 a.m. }*

SEN. GLENN ROUSH asked **Mr. Alan Strange** if these clinics see people from the outlying areas since that is the type of Montanans he represents. **Mr. Strange** felt that most of the people would come from the specific area of the clinics. The most rural health care center is in Livingston. They serve all of Park County and many of those people would be from the rural areas.

SEN. ROUSH asked **Dr. Bauman of Kalispell** the same question. Not to his knowledge do dentists send patients to these community health centers and then stated that the rural areas in Montana are a concern to the Montana health associations. In the future, the American Dental Assoc., sees a shortage of dentists. I don't know how to actually answer your question. **SEN. ROUSH** then asked if dentists in the rural areas participating and serving the indigent and those on Medicaid dental patients. **Dr. Bauman** felt that they were doing that.

SEN. BEA MCCARTHY asked **Dr. Klampe** if his objection to the bill was the University participation. **Dr. Klampe** said no but his objection does include the University. **SEN. MCCARTHY** asked if any of the University students/patient carry a health care insurance program that would take care of their dental bills if they went to a private dentist. **Dr. Klampe** felt sure that there are those people like that. This past summer, two of his patients in their 40's opted to go to the University for some credits and while there they received a total of 13 porcelain crowns which costs about \$7000 which is out of his pocket. So they got their discretionary dental care done there. **SEN. MCCARTHY** then asked if it is possible to get everything done at a University clinic. **Dr. Klampe** replied that

most college students don't need dentures, but University clinics grew just like he is predicting that the health care centers with dental clinics will grow. All government programs grow, grow, grow.

SEN. MIKE SPRAGUE asked **Mr. Small** if these clinics are free or not free. **Mr. Small** said that patients are screened as they come into the clinic for financial need and they are required to show something that would indicate they are in need of care. From that sliding scale the patients ability to pay is determined. The fees set by the medical and dental clinics are set-fee schedules and are available. These are then prorated depending upon their ability to pay. Five dollars would be the minimum set if a patient had no ability to pay. I don't think anything is free. **SEN. SPRAGUE** said that they have a clinic in Billings which is expected to have a return on the investment. They are paid though through government grants which comes from taxpayers' money. **Mr. Small** said that the Great Falls clinic offers a portion of that. However, our building was funded through money saved over the years. Grants were used. Federal funding is a portion of it as well as city and county taxes who are served in that community. He did not think the federal funds were the driving force.

SEN. SPRAGUE asked former Senator **Dr. Klampe** to respond. **Dr. Klampe** said that it depends on what one means by free. One dentist told him that yes, some patients have insurance and yes they are seen because the clinics need their revenue. That gives you an idea of what these clinics are about. They need people to pay to keep them alive. Missoula has 24 paid bureaucrats working in the clinic before they even open the doors. Soon there will be over 30 people working in that clinic.

SEN. THOMAS asked **Ms. Schlagel** if they would be willing to submit their annual operating budget that they are working with right now. **Ms. Schlagel** said that she is not in that position to say yes or no. **Mary Beth Frideres, Cooperative Health Center, Helena** came forward to answer. She said that she would be willing to submit their annual operating budget. On last year's budget, the expenses were around \$26,000 for a part-time coordinator and revenue from all sources was around \$3800. **Kip Smith, Assoc. Director of Primary Assoc. from Missoula** said that they would work to get copies of the operating budget to the Senator.

SEN. JOHN HERTEL asked **Ms. McCue** to comment on a statement made by Dr. Gillam stating that: the present law is satisfactory both if this piece of legislation passes or does not pass. **Ms. McCue** said that she did not agree with that statement because if the court were to find that the clinics were violating the Practice Act, which is what they are saying, then you need to change this in

statute to allow the clinics to use the model that they plan to follow by using volunteer dentists. **Mr. Gillam** responded to her statement. His statement was this: no matter what happens in the district court, the present law is satisfactory. It has nothing to do with whether this bill passes or not. His lawsuit is in court right now with Judge Hensen and the question is whether the clinics are in violation of current law.

SEN. MCCARTHY asked **Dr. Nancy Finch** to come forward and add something to the hearing. She supervises the student health service at the University. The University's clinic started in 1981 because students had problems getting dental care in Missoula. Dentists required cash up front. They started by contracting dentists and that worked for a couple of years but did not work well. They felt they need emergency dental care for the students and no extra work was to be done. They do crowns for root canals. For two years medical health care was offered to spouses of students.

SEN. SPRAGUE asked **Dr. Finch** to define emergency. **Dr. Finch** said that emergency service was for those who had a problem and it would deteriorate if they don't receive care within a certain time. **SEN. SPRAGUE** said that with an emergency root canal, it seems that the patient should be referred back to his own dentist for the crown after the pain had been taken care of. **Dr. Finch** said they prioritize emergency care meaning that students that have routine appointments are bumped everyday for an emergency. Their priority has always been to see the emergencies first. There are several stages to emergency treatment. The first is immediate, the next is a follow-up. If a student does not return home right away, the student may not get the care he needs as soon as it is needed.

{Tape : 2; Side : A; Approx. Time Counter : 47}

{Tape : 2; Side : B; Approx. Time Counter : 0}

Closing by Sponsor:

SEN. DALE BERRY closed. I would like to thank the opponents and the proponents. There are some very legitimate concerns. In addition, I have had many, many calls and those calls have been overwhelming in support of this bill. At present, there are many volunteers in the clinics and the dentists themselves are supporting this bill and the MT Dental Assoc. There has been a lot of negotiation on this bill. One of the problems has been with the primary care associations and the dental associations that have been squelched by the federal statutes and I think some of those need to be changed. The federal mandate with this funding basically says that they cannot turn anyone away. It requires this

good faith clinic to treat people who are capable of paying somewhere else. On the other hand, private practice dentists do have the ability to turn people away. They can ask for insurance and funds up front. I think there is a need for these clinics. Thank you for your consideration.

{Tape : 2; Side : B; Approx. Time Counter : 5}

EXECUTIVE ACTION ON SB 210

Motion/Vote: SEN. SPRAGUE moved that SB 210 DO PASS. Motion carried unanimously. 6-0

EXECUTIVE ACTION ON SB 132

Motion/Vote: SEN. MCCARTHY moved that SB 132 BE TABLED. Motion carried unanimously. 6-0

EXECUTIVE ACTION ON SB 130

Motion/Vote: SEN. MCCARTHY moved that SB 130 BE TABLED. Motion carried unanimously. 6-0

ADJOURNMENT

Adjournment: 11:35 A.M.

SEN. JOHN HERTEL, Chairman

MARY GAY WELLS, Secretary

JH/MGW

EXHIBIT (bus23aad)